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APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/809,929 03/26/2004			Kentaro Nakamura		1081.1196		6769
TLE OF INVENTION	: WAVELENGTH DIV	ISION MULTIPLEXING	TRANSMISSION SYSTE	EM			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TO	TAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0		\$1740	09/30/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS				
KIM, DAVID S		2613	398-082000				-
Change of correspondence address or indication of "Fee Address" (37 FR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON PILEASE NOTE: Unless an assignee is identified below, no assignee recordation as set forth in 37 CFR 3.11. Completion of this form is NO			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. HE PATENT (print or type) Lata will appear on the patent. If an assignee is identified below, the document has been filed for a substitute for filing an assignment.				
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) KAWASAKI, JAPAN 09/09/2008 EP0INGUI 0000015 10809929							
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a. Applicant claims	us (from status indicated SMALL ENTITY status Publication Fee (if requested Status	s. See 37 CFR 1.27.	b. Applicant is no long	ger claiming SMAL	L ENTITY	status. See 37 CF	R 1.27(g)(2).
Authorized Signature	Courted of the Officer Sta	Tour Prademark	Office.	Date Sy	lubi	, 8,200 35,230	8
Typed or printed name		RAVETZ		- Trogisquiion 110			
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